

GEORGIA DEPARTMENT OF AGRICULTURE

FILE IN TRIPLICATE

DATE _____

Capitol Square, Atlanta, Georgia 30334

Phone No. (404) 656-3637 Fax No. (404) 463-6670

SOIL AMENDMENT REGISTRATION APPLICATION

TO: THE COMMISSIONER OF AGRICULTURE

THE UNDERSIGNED HEREBY MAKES APPLICATION FOR THE REGISTRATION OF THE FOLLOWING SOIL AMENDMENTS
PLEASE LIST DISCONTINUED ITEMS ON A SEPARATE SHEET (ALSO IN TRIPLICATE)

PRODUCT: Brand Name of Product as Appears on Label	(attach to each application a copy of each label, tag, or facsimile)	GA Registration No. (Office Use Only)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

CHECK ☐ MONEY ORDER ☐ IN THE AMOUNT OF \$_____ IS ENCLOSED HEREWITHIN IN PAYMENT OF REGISTRATION.
FEE IS \$50.00 FOR EACH PRODUCT PER CALENDAR YEAR, JANUARY 1 THROUGH DECEMBER 31.

CO. NAME AS IT APPEARS ON LABEL _____ TELEPHONE _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

SUBMITTED BY (CO. NAME) _____ TELEPHONE _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

SIGNATURE _____ TITLE _____

CERTIFICATE OF REGISTRATION

This registration expires on each "December 31", but for so long as appropriate fees thereon are paid, may be deemed to be renewed from year to year unless surrendered, abandoned, revoked or canceled or unless the Commissioner of Agriculture shall require at any time a new application for any annual renewal thereof. (If all fees are not paid promptly after the end of each year, registration is deemed abandoned and may be renewed only upon new application and payment of appropriate fees.)

FOR GEORGIA REGISTRATION OFFICE USE ONLY

YEAR								
Date								
Voucher #								
Check #								
Amount \$								

GEORGIA DEPARTMENT OF AGRICULTURE
Thomas T. Irvin, Commissioner

Approved By _____
Division Manager